



DEPARTMENT OF THE NAVY

BOARD FOR CORRECTION OF NAVAL RECORDS

2 NAVY ANNEX

WASHINGTON DC 20370-5100

JRE

Docket No: 2737-99

19 April 2000

[REDACTED]

Dear [REDACTED]

This is in reference to your application for correction of your naval record pursuant to the provisions of title 10 of the United States Code, section 1552.

A three-member panel of the Board for Correction of Naval Records, sitting in executive session, considered your application on 6 April 2000. Your allegations of error and injustice were reviewed in accordance with administrative regulations and procedures applicable to the proceedings of this Board. Documentary material considered by the Board consisted of your application, together with all material submitted in support thereof, your naval record and applicable statutes, regulations and policies. In addition, the Board considered the advisory opinion furnished by a designee of the Specialty Advisor for Psychiatry dated 22 February 2000, a copy of which is attached.

After careful and conscientious consideration of the entire record, the Board found that the evidence submitted was insufficient to establish the existence of probable material error or injustice. In this connection, the Board substantially concurred with the comments contained in the advisory opinion. Accordingly, your application has been denied. The names and votes of the members of the panel will be furnished upon request.

It is regretted that the circumstances of your case are such that favorable action cannot be taken. You are entitled to have the Board reconsider its decision upon submission of new and material evidence or other matter not previously considered by the Board. In this regard, it is important to keep in mind that a presumption of regularity attaches to all official

records. Consequently, when applying for a correction of an official naval record, the burden is on the applicant to demonstrate the existence of probable material error or injustice.

Sincerely,

W. DEAN PFEIFFER
Executive Director

Enclosure

**NATIONAL NAVAL MEDICAL CENTER
DEPARTMENT OF PSYCHIATRY
BEHAVIORAL HEALTHCARE CLINIC
BETHESDA, MARYLAND 20889-5600**

22 February 2000

From: MAJ Levandowski, MC, USA
To: CAPT William Nash, Specialty Advisor for Psychiatry, Chief BUMED, Naval Hospital, San Diego, CA 92134-5000

Via: Chairman, Department of Psychiatry, NNMC

Subj: APPLICATION FOR CORRECTION OF NAVAL RECORDS [REDACTED]

Ref: (a) 10 U.S.C. 1552
(b) Board for Corrections of Naval Records letter of 31 Jan 00 to Specialty Advisor for Psychiatry

Encl: (1) BCNR File
(2) Service Record
(3) VA Records, Medical Records

1. Per your request for review of the subjects petition for a correction of his naval records and in response to reference (b), I have thoroughly reviewed enclosures (1) through (3).
2. Review of available Navy medical records revealed:
 - a) Entrance, overseas, and separation physicals revealed the subject to be fit for full duty, with no indication of psychiatric disease, defect or treatment for same.
 - b) Medical records reveals no history of evaluation or treatment of any psychiatric disease or defect while on active duty.
 - c) Medical records are notable for recurrent complaints of knee pain, normal exams and recurrent request by subject for medical board for knee pain.
3. Review of the service record revealed:
 - a) The subject entered active duty on 07 July 89. He completed basic training, Strand school, and Operations Specialist Schooling. He was assigned to WESTPAC, Yokosuka, Japan on 16 May 90. This was followed by assignment aboard the USS Blue Ridge on 01 June 90 until time of discharge on 28 Jan 91. The service member's performance evaluations while aboard the USS Blue Ridge ranged from 1.0 to 2.0.
 - b) There were no awards or letters listed in the service record.

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- c) The subject received non judicial punishment on 06 Dec 90 for violation of article 86, disobedience of a lawful written order and failure to go to an appointed place of duty (19 specifications) on 10 Jan 91 the subject received non-judicial punishment for violation of articles 92 and 112a, wrongfully using and possessing a controlled substance(hashish) and violation article 134, solicitation of another to commit an offense.

On 14 January 1990 a Drug and Alcohol report revealed that the subject had used marijuana while ashore and off duty from the USS Blue Ridge. The report further noted on 21 September 1990 he had admitted smoking hashish.

On 6 March 1991 the subject was discharged under other than Honorable Conditions/misconduct (Commission of a serious offense).

- d) The subject's 15 April 1994 request for review of discharge. The subject claims that discharge should have been honorable and for homosexuality, not as dishonor for misconduct. Board finds relief not warranted.

4. Review of VA file revealed:

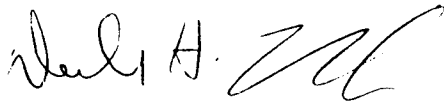
- a) Psychiatric emergency consult report dated December 1993 documenting long history of cannabis dependence and diagnosis of Bipolar Affective Disorder.
- b) Hall-Mercer Community Mental Health/Mental Retardation Center of Pennsylvania Hospital record, dated 10 November 1993, documenting "problems" including, depression, mood swings, substance abuse (marijuana and ETOH) and homosexuality.
- c) Hall-Mercer Community Mental Health/ Mental Retardation Center of Pennsylvania Hospital Transfer summary dated July 1994 documenting treatment for "marijuana use" (cannabis dependence), "alcohol abuse" (alcohol dependence) and Bipolar Disorder, depressed.

5. Discussion:

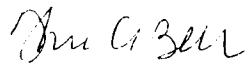
- a) Review of medical records reveals no documentation of psychiatric disease or defect which would support the claim that the subject was suffering from Bipolar Affective Disorder while on active duty.
- b) The subject's VA records document diagnoses of substance dependence (cannabis and ETOH) as well as Bipolar Disorder. VA records indicate earliest diagnosis of Bipolar Disorder in November 1993. There is no documentation of the diagnosis of Bipolar Disorder prior to the November 1993 time indicated. The subject's substance dependence diagnosis documented by the VA is consistent with the nature of his discharge: misconduct; use of hashish.

- 6. Opinion and Recommendations: There is no evidence in the information provided to support a diagnosis of Bipolar Disorder while on active duty. Amendment of the

subject's discharge from the military by virtue of a medical diagnosis is not warranted.



DALE H. LEVANDOWSKI
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Psychiatric Resident



THERESA A. BELL
LCDR, MC, USNR
Staff Psychiatrist